

22764 U.S. PTO
020304

Practitioner's Docket No.

PATENT

Preliminary Classification:

Proposed Class:

Subclass:

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Mail Stop Patent Application
Commissioner for Patents
P.O. Box 1450
Alexandria VA 22313-1450

22387 U.S. PTO
10/771251
020304

NEW APPLICATION TRANSMITTAL

Transmitted herewith for filing is the patent application of

Inventor(s): Jack Millay; Paul Patterson

For (title): CUFF FOR MEASUREMENT OF BLOOD PRESSURE

1. Type of Application

This application is for an original (nonprovisional).

2. Papers Enclosed

- A. Required for filing date under 37 C.F.R. § 1.53(b) (Regular) or 37 C.F.R. § 1.153 (Design) Application

EXPRESS MAILING UNDER 37 C.F.R. § 1.10*

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I hereby certify that this paper, along with any document referred to, is being deposited with the United States Postal Service on this date _____ in an envelope addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 as "Express Mail Post Office to Addressee" Mailing Label No. _____.

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13 Page(s) of Specification
 4 Page(s) of Claims
 6 Sheet(s) of Drawing(s)--Informal

B. Other Papers Enclosed

2 Page(s) of declaration and power of attorney.
 1 Page(s) of abstract

3. Declaration or Oath

Enclosed
 Unsigned Declaration.

4. Inventorship Statement

The inventorship for all the claims in this application is the same.

5. Language

English

6. Assignment

An assignment of the invention to Pharma-Smart, LLC will follow.

7. Fee Calculation (37 C.F.R. § 1.16)

Regular Application									
CLAIMS AS FILED									
	Number Filed		Number Extra		Rate		Basic Fee 37 C.F.R. § 1.16(a) \$770.00		
Total Claims (37 C.F.R § 1.16(c))	15	–	20	=	0	x \$	18.00	= \$	0.00
Independent Claims (37 C.F.R § 1.16(b))	3	–	3	=	0	x \$	86.00	= \$	0.00
Multiple Dependent Claim(s), if any (37 C.F.R § 1.16(d))						\$	290.00	\$	0.00
Filing Fee Calculation								\$770.00	

8. Assertion of Small Entity Status

Applicant hereby asserts status as a small entity under 37 C.F.R. § 1.27.

Filing Fee Calculation (50% of above Filing Fee Calculation) \$385.00

9. Fee Payment Being Made at This Time

Enclosed

Filing Fee \$385.00

Total Fees Enclosed \$385.00

10. Method of Payment of Fees

Attached is a check in the amount of \$385.00.

Charge any additional fees required by this paper or credit any overpayment in the manner authorized below.

A duplicate of this paper is attached.

11. Authorization to Charge Additional Fees

The Office is hereby authorized to charge, in the manner shown above, the following additional fees that may be required by this paper and during the entire pendency of this application.

37 C.F.R. § 1.16(a), (f) or (g) (filing fees)

12. Instructions as to Overpayment

Credit Account No. 08-0865.

Date:

1/21/04



Neal L Slifkin
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In re application of: Millay et al.

Application No.: N/A

Group No.: N/A

Filed: N/A

Examiner: N/A

CUFF FOR MEASUREMENT OF BLOOD PRESSURE

Mail Stop New Patent Application

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EXPRESS MAIL CERTIFICATE

"Express Mail" label number EL998148802US

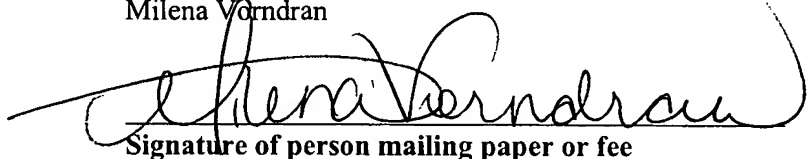
Date of Deposit 2/3/2004

I hereby state that the following *attached* paper or fee

- Transmittal of New Patent Application, 13 pgs Specifications, 4 pgs claims, 6 pgs drawings, 2 pgs Dec./Oath, 1pgs abstract; check in the amount of \$385; and acknowledgement post card.

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Milena Vorndran

A handwritten signature in black ink, appearing to read 'Milena Vorndran', is written over a horizontal line.

Signature of person mailing paper or fee